



OFFICE USE ONLY
Accounting Code: **PF**

CITY OF SUGAR LAND
Planning Department
Plat / General Plan Submittal Application

Please provide the following information & return your submittal to the Planning Department, 2700 Town Center Blvd. N., Attention: Development Review Coordinator (Deadline for Submittals is Monday / 3:00 p.m.)

Subdivision Name _____ **Development** _____

Submittal Type

- | | | |
|--|--|--|
| <input type="checkbox"/> Preliminary Plat | <input type="checkbox"/> Final Plat | <input type="checkbox"/> Short Form Final Plat |
| <input type="checkbox"/> Preliminary Replat | <input type="checkbox"/> Final Replat | <input type="checkbox"/> Vacation Plat |
| <input type="checkbox"/> Extension of Approval | <input type="checkbox"/> Street Dedication | <input type="checkbox"/> Amending Replat |
| | | <input type="checkbox"/> Minor Plat |
| | | <input type="checkbox"/> General Plan |

Reason for Replat or Amending Replat

Type of Plat

- | | |
|--|--|
| <input type="checkbox"/> Single-Family Residential | <input type="checkbox"/> Planned Development |
| <input type="checkbox"/> Multi-Family Residential | <input type="checkbox"/> Commercial / Industrial |
| <input type="checkbox"/> Zero Lot Line/Patio Homes | <input type="checkbox"/> Business / Office |

Owner _____ **Contact** _____

Address _____

Phone _____ **Fax** _____

Email _____

Engineer or Planner

Company _____ **Contact** _____

Address _____

Phone _____ **Fax** _____

Email _____

Plat Location

- ☐ City ☐ Extraterritorial Jurisdiction

Survey/Abstract No. _____

Geographic Location (List major streets, bayous, creeks and adjacent subdivisions) _____

Jurisdictions Utility District _____ School District _____

Levee Improvement District _____ County Precinct _____

Zoning District _____

Plat Data

Total Acreage _____ Typical Lot Size _____

Number of Streets _____ Number & Types of Reserves _____

Number of Lots _____ Total Acres in Reserve _____

Variance Request☐ None☐ Yes (Attached Form)☐ Previously Approved**Improvement Provisions**

Utilities Constructed by _____ Maintained by _____
(upon acceptance)

Pavement Constructed by _____ Maintained by _____
(upon acceptance)

This is to certify that the information on this form is COMPLETE, TRUE and CORRECT and the undersigned is authorized to make this application.

X**Signature of Applicant****Date****CHECKLIST FOR ALL SUBMITTALS :**

- Seven (7) Copies of the Completed Application
- Seven (7) 24" x 36" prints – folded to 8 ½" x 14"
- Submittal Fees for:

Preliminary, Final, & Short Form Final

Base \$800 Per Lot \$2.50

Per Acre of Reserve \$12.50

Amending Replat or Minor Plat

Base \$250

General Plan

New General Plan \$800

Note: A Minor Amendment to existing General Plan is \$100 and major amendment is \$800

Replats (Prelim., Final, or SFF)

Base \$400 Per Lot \$2.50

Per Acre of Reserve \$12.50

Subdivision Reg. Variance

Base \$500 if separate request from plat.

(No fee if variance is part of plat in review)

- **The required applicable letters. (Preliminary Plats require copy of notification letters; Final Plats require a response letter from agencies)**

☐ County Drainage District☐ Levee Improvement District☐ Centerpoint Energy☐ County Engineer (ETJ only)☐ Municipal Utility Dist.
☐ Post Office☐ Applicable Phone☐ Appropriate I.S.D.**Additional Information is needed for the following submittal types:**

- **General Plan**
 - ☐ Nine (9) 24" x 36" prints – folded to 8 ½ x 14 and one (1) 11" x 17" print
 - ☐ Approved Traffic Impact Analysis (T.I.A.) if plan changes or impacts the thoroughfare plan
- **Preliminary Plat**
 - ☐ Two (2) copies of the Utility One-Lines
- **Final Plat / Short Form Final**
 - ☐ Construction Plans (**Must be turned in with Final Plat**) Submitted at an earlier date ____/____/____
 - ☐ Copy of Utility Easement filed by separate instrument (if applicable)
- **Replats**
 - ☐ Seven (7) 24" x 36" copies of the original plat
 - ☐ A list of property owners names and mailing addresses for public hearing
(Residential Final Replats Only)
- **Amending**
 - ☐ Construction Plans Submitted at an earlier date ____/____/____
 - ☐ Copy of Utility Easement filed by separate instrument (if applicable)
- **Extension of Approval**
 - ☐ Letter of Request 30 days prior to expiration date of approval of final

City of Sugar Land Traffic Impact Analysis (TIA) Threshold Worksheet

Complete this form as an aid to determine if your project requires a Traffic Impact Analysis.

Project Name: _____
Location: _____
Applicant/Contact: _____
Contact Phone Number: _____ Contact Email: _____

Application Type (check one):

_____ Zoning (CUP/PD) _____ Site Plan _____ Plat _____ Other: _____

Anticipated Land Use	Units*	ITE Code	ITE Trip Rates / Trips Generated			
			Daily Total	AM Peak Hour	PM Peak Hour	Weekend Peak Hour
			/	/	/	/
			/	/	/	/
			/	/	/	/

* Units should be based on what is used for the trip generation rate (ie. Gross Floor Area, Acreage, etc), be sure to specify in the box.

All Trips generated should be based on the latest edition of the ITE Trip Generation Manual.

All thresholds to determine when a TIA is necessary are contained in the City of Sugar Land's **Traffic Impact Analysis Guidelines** which is available on the City website www.sugarlandtx.gov. Go to the Engineering Department then click on Design Standards.

Applicant's Signature: _____ Date: _____